

RUB OUT ERRORS THOROUGHLY

1. Enter your NAME ( as in NRIC ). \_\_\_\_\_
2. Enter the SUBJECT TITLE. \_\_\_\_\_
3. Enter the TEST NAME. \_\_\_\_\_
4. Enter the CLASS. \_\_\_\_\_

USE PENCIL ONLY  
FOR ALL ENTRIES ON THIS SHEET



0	1	2	3	4	5	6
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0	1	2	3	4	5	6
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0	1	2	3	4	5	6
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Enter your CLASS NUMBER or INDEX NUMBER.
6. Now SHADE the corresponding lozenge in the grid for EACH DIGIT or LETTER

WRITE		SHADE APPROPRIATE BOXES									
I N D E X		0	1	2	3	4	5	6	7	8	9
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		0	1	2	3	4	5	6	7	8	9
N U M B E R		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		0	1	2	3	4	5	6	7	8	9
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		0	1	2	3	4	5	6	7	8	9
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		A	B	C	D	E	F	G	H	I	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. INSTRUCTIONS FOR RECORDING ANSWERS

Suggested answers to each question are given in the question paper. Choose an answer and shade the corresponding lozenge. If there are only four suggested answers, A, B, C, D, ignore E on this sheet. Don't worry if the question paper has less than the 60 questions allowed for below.

1	<input type="checkbox"/>	B	C	D	E		<input type="checkbox"/>	A	B	C	D	E	41	<input type="checkbox"/>	A	B	C	D	E	
2	<input type="checkbox"/>	A	B	C	D	E	21	<input type="checkbox"/>	A	B	C	D	E	42	<input type="checkbox"/>	A	B	C	D	E
3	<input type="checkbox"/>	A	B	C	D	E	23	<input type="checkbox"/>	A	B	C	D	E	43	<input type="checkbox"/>	A	B	C	D	E
4	<input type="checkbox"/>	A	B	C	D	E	24	<input type="checkbox"/>	A	B	C	D	E	44	<input type="checkbox"/>	A	B	C	D	E
5	<input type="checkbox"/>	A	B	C	D	E	25	<input type="checkbox"/>	A	B	C	D	E	45	<input type="checkbox"/>	A	B	C	D	E
6	<input type="checkbox"/>	A	B	C	D	E	26	<input type="checkbox"/>	A	B	C	D	E	46	<input type="checkbox"/>	A	B	C	D	E
7	<input type="checkbox"/>	A	B	C	D	E	27	<input type="checkbox"/>	A	B	C	D	E	47	<input type="checkbox"/>	A	B	C	D	E
8	<input type="checkbox"/>	A	B	C	D	E	28	<input type="checkbox"/>	A	B	C	D	E	48	<input type="checkbox"/>	A	B	C	D	E
9	<input type="checkbox"/>	A	B	C	D	E	29	<input type="checkbox"/>	A	B	C	D	E	49	<input type="checkbox"/>	A	B	C	D	E
10	<input type="checkbox"/>	A	B	C	D	E	30	<input type="checkbox"/>	A	B	C	D	E	50	<input type="checkbox"/>	A	B	C	D	E
11	<input type="checkbox"/>	A	B	C	D	E	31	<input type="checkbox"/>	A	B	C	D	E	51	<input type="checkbox"/>	A	B	C	D	E
12	<input type="checkbox"/>	A	B	C	D	E	32	<input type="checkbox"/>	A	B	C	D	E	52	<input type="checkbox"/>	A	B	C	D	E
13	<input type="checkbox"/>	A	B	C	D	E	33	<input type="checkbox"/>	A	B	C	D	E	53	<input type="checkbox"/>	A	B	C	D	E
14	<input type="checkbox"/>	A	B	C	D	E	34	<input type="checkbox"/>	A	B	C	D	E	54	<input type="checkbox"/>	A	B	C	D	E
15	<input type="checkbox"/>	A	B	C	D	E	35	<input type="checkbox"/>	A	B	C	D	E	55	<input type="checkbox"/>	A	B	C	D	E
16	<input type="checkbox"/>	A	B	C	D	E	36	<input type="checkbox"/>	A	B	C	D	E	56	<input type="checkbox"/>	A	B	C	D	E
17	<input type="checkbox"/>	A	B	C	D	E	37	<input type="checkbox"/>	A	B	C	D	E	57	<input type="checkbox"/>	A	B	C	D	E
18	<input type="checkbox"/>	A	B	C	D	E	38	<input type="checkbox"/>	A	B	C	D	E	58	<input type="checkbox"/>	A	B	C	D	E
19	<input type="checkbox"/>	A	B	C	D	E	39	<input type="checkbox"/>	A	B	C	D	E	59	<input type="checkbox"/>	A	B	C	D	E
20	<input type="checkbox"/>	A	B	C	D	E	40	<input type="checkbox"/>	A	B	C	D	E	60	<input type="checkbox"/>	A	B	C	D	E